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HOUSE BILL 544

49TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2009

INTRODUCED BY

Danice Picraux

AN ACT

RELATING TO HEALTH CARE; ENACTING THE HEALTH CARE COVERAGE
ACCOUNTABILITY AND TRANSPARENCY ACT.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

Section 1. SHORT TITLE.--This act may be cited as the
"Health Care Coverage Accountability and Transparency Act".

Section 2. DEFINITIONS.--As used in the Health Care
Coverage Accountability and Transparency Act:

A. "department" means the human services
department;

B. "medical assistance program" means health care
coverage or assistance that the department provides pursuant to
the Public Assistance Act; and

C. "report" means to post prominently and make
easily accessible on the department's internet web site.

1 Section 3. REQUIRED REPORTING.--

2 A. The department shall report within thirty days
3 of filing any plans, state plan amendments, waiver proposals or
4 amendments, reports, reviews it has filed and any documentation
5 of any public input that was obtained as required by the United
6 States department of health and human services centers for
7 medicare and medicaid services for any medical assistance
8 program. The department shall also report any correspondence
9 with the centers for medicare and medicaid services that the
10 director of the medical assistance division of the department
11 deems to have a significant impact on any medical assistance
12 program.

13 B. The department shall report annually and within
14 thirty days of any change in the per-member per-month
15 capitation rate by category of eligibility and rate cohort for
16 each contract that the department enters into to provide
17 medical assistance pursuant to the Public Assistance Act. When
18 the individual contracts that the department enters into offer
19 rates that differ from each other, the average capitation shall
20 be reported for each category of eligibility and rate cohort
21 and not the rates pursuant to each of the individual contracts.
22 The department shall report annually the average per-member
23 per-month expenditure by category of eligibility for medical
24 assistance programs directly administered by the department.
25 The department shall report annually for each medical

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1 assistance program the percentage of total expenditures that
2 the department and the person with whom it contracts spend on
3 administrative expenses, exclusive of health care services
4 provided to individual members. The department shall define
5 "administrative expenses" when reporting on administrative
6 expenses.

7 C. The department shall report on a monthly basis:

8 (1) enrollment and demographic data on
9 individuals in each medical assistance program, including age,
10 sex, ethnicity, income level, employment status, marital status
11 and parental status; and

12 (2) data on employer involvement in medical
13 assistance, where applicable, including the number of
14 participating employers, their size by number of employees,
15 their geographic location by county and their financial
16 contributions.

17 D. The department shall report on a quarterly basis
18 budget projections and actual expenditures by program and
19 category of eligibility and all actuarial analyses related to
20 medical assistance programs.

21 E. The department shall report annually all
22 information that is currently provided to the department or
23 routinely collected on utilization, quality and performance
24 data for each medical assistance program.